



300.1042

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: S. Jiang Art Unit: 1617

Re: Application of: Lawrence Friedhoff et al.

 Serial No.: 10/067,593

 Filed: February 5, 2002

 For: **METHOD OF TREATING AMYLOID BETA
PRECURSOR DISORDERS**

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner For Patents
P.O. Box 1450
Alexandria, Va 22313-1450

December 23, 2003

Sir:

Reconsideration of the present application in view of the following amendments and remarks is respectfully requested.

I. INTRODUCTORY COMMENTS

In response to the Restriction Requirement mailed with the Decision of November 26, 2003, granting Applicant's "Petition Requesting Withdrawal of the Holding of Abandonment," please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins of page 2 of this paper.

Remarks begin on page 5 of this paper.

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GP. 1617

FORM PTO-1083

Docket No.: 300.4042
Date: December 23, 2003

COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

In re application of: Lawrence Friedhoof, et al.
Serial No: 10/067,593
Filed: February 5, 2002
For: METHOD OF TREATING AMYLOID BETA PRECURSOR DISORDERS

Sir:

Transmitted herewith is a **Response to Restriction Requirement** in the above-identified application.

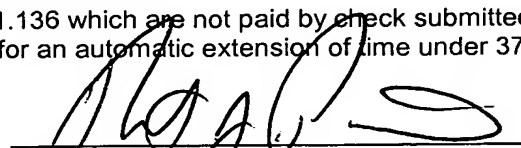
- ☐ Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
☐ Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
☒ No fee for additional claims is required.
☐ A filing fee for additional claims calculated as shown below, is required:

		(Col. 1)	(Col. 2)	SMALL ENTITY		OR	LARGE ENTITY	
FOR:	REMAINING	HIGHEST		RATE	FEE		RATE	FEE
	AFTER	PREVIOUSLY	PRESENT					
	AMENDMENT	PAID FOR	EXTRA					
TOTAL CLAIMS	* Minus**	=	0	x \$	9		x \$	18
INDEP. CLAIMS	* Minus***	=	0	x \$	42		x \$	84
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+	\$140		+	\$280

TOTAL: \$ OR TOTAL: \$

- * If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☒ Also transmitted herewith are:
☐ Petition for extension under 37 C.F.R. 1.136 (in duplicate)
☒ Other: § 803 of the Manual of Patent Examining Procedure, Eighth Edition, Incorporating Revision No. 1
- ☐ Check(s) in the amount of \$**.00** is/are attached to cover:
☐ Filing fee for additional claims under 37 C.F.R. 1.16
☐ Petition fee for extension under 37 C.F.R. 1.136
☐ Other:
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
- ☒ Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
☒ Any patent application processing fees under 37 C.F.R. 1.17.
☒ Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.


Robert J. Paradiso, Reg. No. 41,240
DAVIDSON, DAVIDSON & KAPPEL, LLC
485 Seventh Avenue, 14th Floor
New York, New York 10018
Tel: (212) 736-1940
Fax: (212) 736-2427

I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with sufficient postage to the United States Postal Service as "first class mail" in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on December 23, 2003.

DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: 